02570 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.	18062G-002020US
First Inventor	Ellman, Jonathan A.
Title	METHODS FOR TREATING NEURODEGENERATIVE DISORDERS USING ASPARTYL PROTEASE INHIBITORS
Everess Mail Label No.	EV 338472467 US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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APPLICATION ELEMENTS				Mail Stop Patent Application Commissioner for Patents P.O. Box 1450					s. 126	
See MP	PEP o	chapter 600 concerning utility pate	nt application	contents.			P.U.		50 VA 22313-1450	74
1.	_ (; ⊴	Fee Transmittal Form (e.g., PTO/SB/17) 'Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27.			7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)					
3. 🗵	_		(Total Pages	83]	а. 🔲	Computer F	Readable	Form	(CRF)	
	-	oreferred arrangement set forth be Descriptive title of the Invention Cross Reference to Related Appli	·		•	ecification S	•	_		
	-	Statement Regarding Fed sponso	ored R & D		i. [☐ CD-ROM	or CD-R	(2 copi	es); or	
i		Reference to sequence listing, a t or a computer program listing app			ii. [🗌 Paper nu	mber of p	oages		
		Background of the Invention Brief Summary of the Invention			с. 🗌	Statements	verifying	identit	y of above copies	
	-	Brief Description of the Drawings	(if filed)						ICATIONS PARTS	
		Detailed Description Claim(s)			9. 🛛	Assianme	nt Papers	s from i	prior application	
_		Abstract of the Disclosure			10.	37 CFR 3.	.73(b) Sta	atemen	t 🛛 Power of	
4. ⊠ 5. Oa		-	[Total Sheet [Total Pages	-	11. 🗆	•		•	ment (if applicable)	
а.		Newly executed (original or	-	,	12. 🛚	Information Statement			Copies of I	DS
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		(for a continuation/divisional		completed)	14. 🛛	<u> </u>				
	i.	DELETION OF INVEN Signed statement attached de		ır(s)	_	(Should be	e specific	ally itel	mized)	
		named in the prior application			15. 🔲				Document(s)	
6. 🗷	7 /	1.63(d)(2) and 1.33(b). Application Data Sheet. See 3	7 CED 1 76		16. 🗆	(if foreign Nonpublic			nder 35 U.S.C. 122	
6. 🔀	s /	Application Data Sheet. See S	5/ CFK 1.76			(b)(2)(B)(i)). Applica		t attach form PTO/SB	/35
					17. 🖂	or its equiv		f tima f	or prior application	
18 If a /	CON	TINUING APPLICATION, check a	ennmariete h	ov and sunnh					· · · · · ·	
		n following the title, or in an App					i below ai	10 111 1116	e inst sentence of the	
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under B	3ox 5	ib, is considered a part of the di	isclosure of th	he accompany	ing continu	ation or divis	sional app	lication	and is hereby incorpo	rated by
referen	ce. T	he incorporation can only be re					nitted fron	n the su	ibmitted application pa	rts.
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FEE TRANSMITTAL Complete if Known Application Number for FY 2004 February 5, 2004 Filing Date Effective 10/01/2003. Patent fees are subject to annual revision. First Named Inventor Ellman, Jonathan A. Applicant claims small entity status. See 37 CFR 1.27 Examiner Name Art Unit TOTAL AMOUNT OF PAYMENT 18062G-002020US 1823 Attorney Docket No.

	METHOD OF PAYME	ENT (check all that apply)				FEE CA	ALCULATION (continued)	
Check	Credit Card	Money Order Other None	3. ADD	ITIONAL I	FEES			
Deposit Acc	ount:		Large	Entity	Small	Entity		
Deposit Account 20-1430		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Number			1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit			1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Account Name	Townsend and	Townsend and Crew LLP	1053	130	1053	130	Non-English specification	
i i	uthorized to: (check	all that apply	1812	2,520	1812	2,520	For filing a request for reexamination	
		Credit any overpayments	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
	• • •	y underpayment of fee(s) cept for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	tified deposit account.		1251	110	2251	55	Extension for reply within first month	
	FEE CA	LCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FI	LING FEE		1253	950	2253	475	Extension for reply within third month	
Large Entity	Small Entity		1254	1,480	2254	740	Extension for reply within fourth month	
Fee Fee		Description Fee Paid						
, ,	Code (\$)	1. Silver for	1255	2,010	2255	1,005	Extension for reply within fifth month	1005
		ty filing fee 385	1401	330	2401	165	Notice of Appeal	
		rign filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
		ssue filing fee	1403	290	2403	145	Request for oral hearing	
		visional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
CURTOTAL (4)			1452	110	2452	55	Petition to revive - unavoidable	
ļ	SUBTOTAL ((\$)385	1453	1,330	2453	665	Petition to revive – unintentional	
2. EXTRA CL	AIM FEES FOR U	JTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	
		Fee from	1502	480	2502	240	Design issue fee	
l	Extra Cla		1503	640	2503	320	Plant issue fee	
Total Claims 52	2 -20** = 32	\$9 = \$288	1460	130	1460	130	Petitions to the Commissioner	
Independent 3	-3** = 0	X\$43 = \$0	1807	50	1807	50	Petitions related to provisional applications	
Multiple		X = \$145	1806	180	1806	180	Submission of Information Disclosure Stmt	
Dependent1 Large Entity	Small Entity	^	8021	40	8021	40	Recording each patent assignment per	
Fee Fee	Fee Fee		1				property (times number of properties)	
Code (\$) 1202 18	Code (\$) 2202 9	Fee Description Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1201 86	2201 43	Independent claims in excess of 3	.1810	770	2810	385	For each additional invention to be	
1203 290	2203 145	Multiple dependent claim, if not paid					examined (37 CFR § 1.129(b)) Request for Continued Examination	—
1204 86	2204 43	** Reissue independent claims over original patent	1801	770	2801	385	(RCE)	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$)433				e (specify)				
**or number previously paid, if greater; For Reissues, see above			*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)1005					

SUBMITTED BY	1			Com	plete (if applicable)
Name (Print/Type)	Eugenia Garrett- Wackowski	Registration No. (Artomey/Avent)	37,330	Telephone	925-472-5000
Signature	Lucinia	Hamil Wockowski		Date	2/5/04

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